## What makes my heart sing...

## by Anne Vervarcke

It is said that philosophy starts with surprise, amazement and wonder. I think the same applies to homeopathy. In all these years homeopathy hasn't stopped surprising me, amazing me and filling my days with wonder. The potential to cause a total transformation in a person, completely effortlessly on their side, and the opportunity to apply this method and to witness when it happens again and again, day after day, that is what keeps my heart singing.



bmeopathy is a strange business; in the last 25 years of being intensely engaged in studying, practising, teaching and writing about homeopathy, my conclusions oscillated between, 'this is the most amazing thing in the world' and 'homeopathy doesn't exist, it's all fantasy; let's forget about it and go plant potatoes'.

Despite that, the first idea appears to have always sounded loudest and kept me going on this extraordinary quest. As you can hear, I'm still not burned out, disappointed or cynical after all those years. This is why.

As with everybody else, I needed the first 15 years to become familiarised with the new paradigm. A wonderful world opens as the mind has to stretch itself to be able to receive all the exciting new ideas. With the history, philosophy and principles come a lot of unfamiliar concepts and it takes a while to internalise those. Then one starts to practise with the recklessness of the beginner, ready to cure everybody from everything, whether they ask for it or not.

Unfortunately beginning homeopaths often need some extra income and therefore start to teach. As I wanted to spread the word, I was one of them. Now, 10 years later I think, how little did I know! In my defence I can declare that I only taught what the great masters said and that I didn't trumpet my own immature ideas. So I guess that's all right then, as I didn't distribute my undeveloped

understanding and unproved conclusions as the truth.

And by the way, isn't it the same with raising children? You also have to do this when you're still too young, when there is still so much about yourself and the world you have to learn, understand and process. It seems better to do this when old age allows for equanimity and unconditional love. But then again: what good can come forth from those children when they are so pampered that they have no motivation to go on their personal quest? It takes some difficulties and some suffering in order to be motivated to come out of the hammock, doesn't it?

In short, the two are needed and are good, as long as we keep in mind that beginning homeopaths make mistakes; one of them is they don't know how little they know yet. Anyway, the advantage was that it kept my enthusiasm fresh enough to ignite over and over again the homeopathic flame in students and to introduce them to wonderful Homeopathyland.

What I've seen happening often with homeopaths in their second phase, let's say after practising 10 years and witnessing successes and failures, is a kind of relativising state. 'Oh well, as long as you prevent the patients form taking antibiotics, you did a good job'. 'Oh well, every remedy helps the patient taking his next step'. 'Oh well, the journey to the deepest core of the problem is a healing in itself'.

While this is all true and legitimate I felt I didn't study relentlessly for 15 years only to be able to give any old remedy and by doing so cause no harm. Or listen to somebody telling me all his complaints and worries and then walk home relieved. It occurred to me I could have done all this without studying for one single hour!

It's time for a little confession: I am one of those believers in the simillimum. I am. I believe in it even more strongly after all those years. I realise that as such I touch the nerves of many of my colleagues. This search for the one and only remedy is the summit of arrogance, pride, conceit and hubris . I fully agree. It is a claim to be able to find the needle in the haystack, mostly within the two hours of the case taking. That is an almost impossible mission. Well... some people like a bit of a challenge to get them going.

**About the Author:** Anne Vervarcke graduated in Oriental Philology and Anthropology and took later courses in classical homeopathy in Belgium and in The Netherlands. She established 'The Centre for Classical Homeopathy' (CKH) in Leuven, Belgium and was teacher and director for 15 years. She has also had a private clinic since 1989. Currently she provides international training and seminars in different countries. In Belgium she still teaches in the CKH and does Master Classes with live cases. After attending countless seminars, investigating, practising and teaching for about 25 years, she has developed her own style and method in the art of homeopathy.

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So, despite of being aware of how antipathetical, haughty and over-confident this endeavour is, I can only admit that is the one thing that makes homeopathy worthwhile for me. I can't help it that I am the way I am (yes, I'm treated by very good homeopaths, thank you) and actually I can live with it quite well. If patients, confronted with their awkward personality traits, exclaim to me in despair, 'but why am I like this!?' I tell them that criticism with the way they are must be addressed to the Creator, not to their homeopath. And me, personally I wouldn't offend the Creator with telling Him he did a bad job in my case.

For me, to spot this pattern of a patient's disturbance, to see the coherence in his or her expressions, sensations and functions, to crack the code and thus to know the remedy, is such a thrill. This is exactly what I'm aiming for in every patient; this is and has always been what really makes my heart sing.

Do you know why? Because of the very miracle that takes place before your eyes when a simillimum acts. It is as if the spell is broken and the patient, often without being aware of it, completely effortlessly, becomes what I summarise as 'the best version of himself'.

I use diagram 1 to clarify the method I have developed over the last ten years.

You can see the five rings, which represent our five bodies and levels of experience. The disease I call the vital disturbance is situated on the 5th or sensation level and it expresses itself with signs and symptoms on mind and body, as Hahnemann taught us in the Organon. If the vital disturbance is met with a simillimum, logically the expressions disappear; it is as if their source ran dry.

On the physical level chronic symptoms fade away; on the energy level balance is restored in the hormonal, neurological and immunological system and vitality is enhanced. On the mental/emotional level, as the source of the problems here dries up as well, worries melt away like snow in the sun. When we don't dwell any longer on all the dreadful things they did to us in the past and we are not occupied by unwelcome anxieties for the future, what is there to think about? Hence the emotions calm down, so much so that people often wonder if they have become insensitive. We all are hooked on our emotionality and inflate its importance. Soon one gets accustomed to the new state of carelessness, joy and peace. The volume of the ego noise turns down and one feels no reason

## Levels of Experience

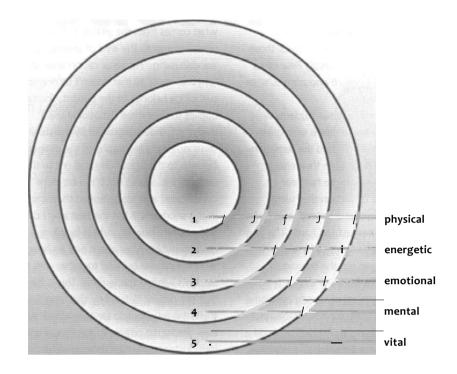


Diagram 1

to be defensive anymore. The need to fill the bottomless hole inside with love, attention, admiration and success in order to feel OK disappears: the patient feels OK because he realises he is OK.

That is what the simillimum does: it loosens the straitjacket of 'conditions to be OK' and when we see this happening our patients become more relaxed; they look younger, brighter, more beautiful, smiling, a person who gives you the freedom to be yourself as he granted himself acceptance to the way he is. Perfect in his imperfection. As is life.

Wouldn't that make you tick? Wouldn't that make anybody tick? Didn't every homeopath witness this miracle at least a few times in his or her career, enough to demonstrate that it is possible? And isn't every homeopath then equally excited by the promise that this is the potential of homeopathy?

I know the difficulty of the task ahead might discourage us. It's like your job demands that you climb a peak of the Himalayas every day. I must confess again, that this rather sounds like an invitation to me than putting me off (my miasm must be obvious by now). It's not because it looks tough that we don't do it. It's like conquering a mountain top; the reward of the view made it worth the trouble.

It must be clear by now that my focus

always has been and still is to this day to find the simillimum. The discussion whether a person needs just one remedy for his whole life is interesting but not essential. The simillimum is the remedy that covers the biggest totality: the vital disturbance - as individual as one's fingerprints - that is modelling thoughts, feelings, actions and physical health.

Now comes the crucial question; how to spot the simillimum in every case?

How to crack a patient's code has always been the core of my teachings. Everybody is of course aware that this is a work in progress and we add knowledge every day. But the basic ideas are established and work very well. In my opinion one is entitled to use whatever knowledge is available from whatever source, as long as it stood the test of critical discernment.

In my homeopathic education there is no doubt about the enormous contribution of Sankaran's ideas. Just at the time that I started practising in the late 90s I found the homeopathic clinical recommendations lacked any consistency; we always ended up by prescribing the same polychrests, and I was ready to give up. That is the moment I first encountered Sankaran in a seminar and was encouraged and motivated again to go on. I followed his developments from close by,

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spread his teaching in my school from the early 90s and came to the same conclusion that lots of homeopaths came to, working with the sensation method. Either you have what you think is a great sensation case (although you realise later that many of those magnificent *Cockatoo* and *Grizzly Bear* cases actually needed *Magnesium phosphoricum*) or no case at all.

In the school, I saw how our students were making nonsensical prescriptions with great certainty that they had reached the sensation, or they asked, why not? Then their energy level dropped, or they left the five year curriculum with the conviction they were absolutely unable to take a decent case. The sensation method was just too hard. This was not what I liked my students to be taught in their training; this was not the message I wanted them to take from the school.

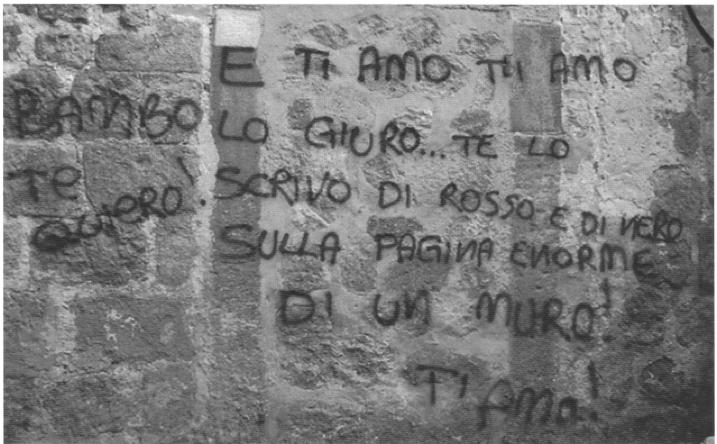
From then on my purpose was to overcome those difficulties as I saw the advantages of the sensation idea in my daily practice. And I learned most from my embarrassing mistakes during the first year I tried to squeeze a sensation out of a patient. Now I have developed a much more pragmatic, practical and natural approach. My happy message is that it need not be that hard. You don't have to bring your patients all the way to that

almost unattainable goal of letting them verbalise their sensation. The vital sensation is on all levels all of the time!

The trick now is to differentiate on all levels what comes from the vital disturbance and what belongs to the level of experience we are discussing. For instance: on level one (physical level); all that doesn't belong to the pathology belongs to the patient. The same applies to level three (emotional level); everything that is explained by the story, the situation or the biography of the patient belongs to the personality and not to the vital disturbance, and so on. It is a bit more complicated and sophisticated than it sounds in this short article but the best way I can demonstrate how it works is by taking live cases in public. After about half an hour, we send the patient out and together with the students I define the territory. This is the area that the patient defined by choosing the topics talked about so far. We would never ever interrupt a patient in this most important introductory part of the interview. Many times we are able to discern the kingdom and miasm already. The context of the consultation, which comes down to observation and common sense very often tells us already the exact kingdom from the beginning. Unfortunately the context of a case is mostly overlooked and it is hard to grab in theory. You have to witness it to get an idea of its importance.

The live cases are nothing very deep or very high, nothing very holy or very sacred; it is natural as life itself for people to talk about their problems to a listening ear. A particular listening ear. One that listens to the neverheard-before. One that is ready to be surprised. One that doesn't know and doesn't explain anything away. One that goes, "mmmm, did he say X? That's funny..."

Maybe that is my main message in my teachings; listen for the things you don't understand, for what makes no sense to you; let yourself be surprised by the patient, don't try to be smart. It is in the small remarks, the illogical sequence of examples, the spontaneous topics that come up, the repetitions, the expressions, that particular word or even mistakes. Very often, while putting ourselves in some unearthly state, we look so hard for the sensation somewhere very deep and hidden and hard to get that we don't mention how the patient meanwhile displays the whole case in all detail in very clear and simple words. It's always the same; once you understand a complicated issue, it becomes very simple.



Love message on a wall in Italy. Scource: Wikimedia commons

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